

ALTERNATIVE FUEL TRANSPORTATION PROGRAM PROOF OF CREDIT TRANSFER

This form records signatures of the representatives of the two organizations involved in an exchange of AFV credits. The term “selling” includes trading or otherwise relinquishing credits to another fleets. Likewise, “buying” includes trading or otherwise acquiring AFV credits from another fleet. Please mail the completed form with original signatures to: ***Program Manager, AFV Compliance Program, U.S. Dept. of Energy, EE-2G/Forrestal Bldg., 1000 Independence Ave., SW, Washington, DC 20585***

In addition, send two copies of the form to: ***AFV Program Office, Titan 11410 Issac Newton Square North, Suite 103, Reston, Virginia 20190***

All parties are responsible for the truthfulness of their statements. If the Department determines that any statements are not truthful, the party found in violation of the Program (10 CFR Part 490) will be subject to enforcement action by the Department.

Number of Credits Exchanged:_____ **Date of Credit Exchange:**_____

	Seller	Buyer
Company/Agency Name		
Fleet Name		
Fleet Key Number		
Address and City/State/Zip		
Phone Number/Fax Number		
Organization Representative (Please Print)		
Title		
Signature of Representative	_____	_____
Date of Signature		

If the fleet buying the credit(s) is an alternative fuel provider, the seller must certify that each credit represents a vehicle that solely used alternative fuel when operating in an area where the alternative fuel is available. By signing and dating this statement below, the seller is certifying that the above statement is true.

Signature of Representative_____ Date:_____

Name:_____ Title:_____

FOR OFFICIAL USE ONLY

PM_____ Date_____

Concur (Date)_____ Non-Concur (Date) _____

Credits ____Are Available–APPROVED

Date Record Entered:_____

Credits ____Are Not Available–DISAPPROVED

Data Entry By:_____